

MISSOURI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

-62-018888

DEPARTMENT OF PUBLIC HEALTH AND WELFARE

DO NOT WRITE
ON THIS STUB

AMENDED

Registration District No. 149

Primary Registration District No. 1002

Registrar's No. 2694

STATE FILE NUMBER

FILED JUN 8 1962

1. PLACE OF DEATH

a. COUNTY

JACKSON

b. CITY (If outside corporate limits, give TOWNSHIP only)
OR
TOWN

KANSAS CITY

Length of stay in lb

30 yrs.

c. FULL NAME OF (If NOT in hospital, give location)
HOSPITAL OR
INSTITUTION

QUEEN OF THE WORLD HOSPITAL

Inside Limits
No ☐

2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission)

a. STATE

Mo.

b. COUNTY

Jackson

c. CITY
OR
TOWN

Kansas City

Inside Limits

Yes ☐ No ☐d. STREET
ADDRESS

(If outside, give location)

2210 Montgall

Reside on Farm

Yes ☐ No ☐3. NAME OF DECEASED
(Type or print)First
ALBERTA

Middle

Last
BOYKINS4. DATE
OF
DEATH

Month

Day

Year

MAY 16, 1962

5. SEX

FEMALE

6. COLOR OR RACE

NEGRO

7. Married ☒ Never Married ☐Widowed ☐ Divorced ☐

8. DATE OF BIRTH

6/10/04

9. AGE (last birthday)

58 57

IF UNDER 1 YEAR

Months

Days

IF UNDER 24 HR

Hours

Min.

10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired)

Housewife

10b. KIND OF BUSINESS OR INDUSTRY

Flemming Kansas

12. CITIZEN OF WHAT COUNTRY

USA

13a. FATHER'S NAME

Norman Burks

13b. MOTHER'S MAIDEN NAME

Mary

14. NAME OF HUSBAND OR WIFE

Ellis Boykins

15. WAS DECEASED EVER IN U.S. ARMED FORCES?

(Yes, no, or unknown) (If yes, give war or dates of service)

No

17. INFORMANT

Address

Ellis Boykins, husband 2210 Montgall KCMO.

18. CAUSE OF DEATH (Enter only one cause per line for PART I. DEATH WAS CAUSED BY:

IMMEDIATE CAUSE (a)

Acute pemphigus (acute necrotizing skin disease)

INTERVAL BETWEEN
ONSET AND DEATHConditions, if any,
which gave rise to
above cause (a),
stating the under-
lying cause last.

DUE TO (b)

DUE TO (c)

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal
disease condition given in PART I (a)

Diabetes Mellitus

PART III. If deceased was female was
there a pregnancy in last 90 days.☐ Yes ☒ No ☐ Unknown19. WAS AUTOPSY
PERFORMED?
YES ☒ NO ☐

20a. ACCIDENT

☐

SUICIDE

☐

HOMICIDE

☐

20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)

20c. TIME OF
INJURYHour
a.m.
p.m.

Month, Day, Year

20d. INJURY OCCURRED
WHILE AT WORK ☐
NOT WHILE AT WORK ☐20e. PLACE OF INJURY (e.g., in or about home,
farm, factory, street, office bldg., etc.)

20f. CITY, TOWN, OR LOCATION

COUNTY

STATE

21. I attended the deceased from

4-24-62

to 5-16-62

and last saw her
him alive on

5-16-62

Death occurred at

12:20 P.M.

m on the date stated above, and to the best of my knowledge, from the causes stated.

22a. SIGNATURE

P. M. Williams M.D.

22b. ADDRESS

2604 Prospect K.C. Missouri

22c. DATE SIGNED

5-18-62

23a. BURIAL, CREMATION,
REMOVAL (Specify)

Burial

23b. DATE

5-19-62

23c. NAME OF CEMETERY OR CREMATORY

Blue Ridge Lawn

23d. LOCATION (City, town, or county)

Kansas City

(State)

Mo.

24. FUNERAL DIRECTOR

ADDRESS

Manlove-Williams 1729 Lydia

25. DATE RECD. BY LOCAL REG.

5-18-62

26. REGISTRAR'S SIGNATURE

Ruth H. Long

(Licensed Embalmer's Statement on Reverse Side)

VS 300
Rev. 4/59

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DATE AMENDED

INSTEAD OF

SHOULD READ

ITEM NO.

DOCUMENT

BY AFFIDAVIT OF

Bruce P. McDonald MEDICAL CERTIFICATION

USE BLACK INK

OR

TYPEWRITER RIBBON

AMENDMENTS ON THIS RECORD ARE AS FOLLOWS

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,
or by _____, Student Embalmer No. _____
working under my personal supervision.

Student _____
Signature of Student Embalmer

Signed Myron E. Keller

Licensed Embalmer No. 4633

P. O. Address R. C. 2nd

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.